### ADDENDUM NUMBER 2

MILWAUKEE COUNTY WAR MEMORIAL CONCRETE DECK REPAIRS RE-BID Site #265, Bldg. #40 750 North Lincoln Memorial Drive Milwaukee, WI 53202

Project Number: O517-14626

Notice Number: 6967

Date of Addendum: September 15, 2014

This Addendum to the Contract Documents is issued to modify, explain or correct the original documents, dated August 8, 2014, and is hereby made part of the Contract Documents. Acknowledge receipt of this Addendum in the space provided on the Bid Form, or bid may be rejected.

### **BIDDING DOCUMENTS**

<u>Document 00100 - Invitation to Bid</u> <u>CHANGE</u> Bid Due Date to September 29, 2014 at 2:00 P.M.

### **Bidding Forms**

REPLACE entire set of bidding forms with revised bidding forms attached to and issued as part of this Addendum 2 Re-Bid.

End of Addendum No. 2

## DOCUMENT 00410 BID FORM for

MILWAUKEE COUNTY WAR MEMORIAL CONCRETE DECK REPAIRS RE-BID

Site #265, Bldg. #40 750 North Lincoln Memorial Drive Milwaukee, WI 53202

Project No. O517-14626

	· ·				
Bids Due:	September 29, 2014 at	2:00 P.M.			
Contract 1:	Concrete Deck Repairs				
At the Office o	Room 105 - Cou 901 North 9th St	MILWAUKEE COUNTY CLERK Room 105 - Courthouse 901 North 9th Street Milwaukee, Wisconsin 53233			
We,					
of	(A Corporation)(A Pa	rtnership)(An Individual)-(Cross Out In	applicable)		
UI		Street			
City		State	Zip Code		
Telephone No.	Fax Numb	er	email address		
complete the	above project in strict ac	furnish a satisfactory surety bo cordance with Contract Docum	and in the amount specified to pents dated August 8, 2014.		
	ON OF MATERIALS				
tems.	aders, at their option, the	following substitutions from sp	pecifically named materials or		
MANUFACTU	IRER'S NAME	MATERIAL	ADD/DEDUCT		

### **ALTERNATIVES**

Fill in Alternatives as listed. Where no change in base Bid occurs for Alternative, mark "No Change" or if "Add to or Deduct from base Bid occurs, cross out the description that does not apply. See Section 01230. If an Alternative is left blank it shall mean Contractor shall perform the Work without addition or deduction in the Contract price.

ADDENDUM RECEIPT
We acknowledge the receipt of Addendum to inclusive.
BID SECURITY ACCOMPANYING PROPOSAL
NOTE! See Instructions to Bidders - Article 9, Bid Security, subparagraph 9.1.1, filing original bid bond.
The amount and type of bid security is as follows:

### COMMENCEMENT AND COMPLETION OF CONTRACT WORK

The undersigned agrees, if signatory to the Contract, to commence work upon receipt of Notice to Proceed and achieve Substantial Completion of the Work by April 10, 2015. Waterproofing Work of the Contract shall be complete no later than November 24, 2014.

(NOTE! See Document 00800 - Supplementary Conditions - S.C. 12.07, for Liquidated Damages associated with the contract work.)

BIDDER'S CERTIFICATE - Section 66.0901(7),	Wisconsin Statues
prepared this bid from Bid Documents and have Milwaukee County.	certifies that they have examined and carefully checked same in detail before submitting bid to
of a bid shall commit the bidder to comply with M	ges, understands and agrees that the submission lilwaukee County's requirements as outlined in The bidder also agrees to comply with the specific
The bidder's commitment for the Contractor Res 50%.	idency Program Participation on this project is
(Signature of Authorized Representative)	
(Title)	-
Subscribed and sworn to before me this	_day of,
20  My commission expires	, 20
- A	
	(Notary Public)

### PROJECT NO. O517-14626 SCHEDULE OF PRICES

WMC/MAM Conrete Deck Restoration
AT: Milwaukee County War Memorial Center
750 North Lincoln Memorial Drive
Milwaukee, Wisconsin

Note: Bidder must state prices in words and figures and sign proposal. Furnish and install each item as specified in contract documents.

Item No.	Approx. Quantities		Unit Price in Figures	Total Amount of Bid
	10.111			
BASE BIL	<u>)</u>			
1		Relocate monument to west of building prior to demolition and then back to the plan location following construction,		
		Per each		
2		Demolition of existing deck, insulation and waterproofing, of courtyard, walks and south stairs. Includes disposal of old planters and benches.		
		Per s.f.		
3		New 3-inch deck, insulation and waterproofing system. Includes all reinforcing, drains, sealants, flashing and accessories required.		
		Per s.f.		
4		Remove exist. electrical outlet, extend conduit as needed, provide new box and cover to meet current codes.		
		Per each		
5		Remove, clean and replace all sealant at caulked joints on remaining north steps, includes all accessories.		
		Per I.f.		
6		Replace unsound concrete surfaces on substructure and patch spalls per specifications.		
		Per s.f.		

### PROJECT NO. O517-14626 SCHEDULE OF PRICES

WMC/MAM Conrete Deck Restoration
AT: Milwaukee County War Memorial Center
750 North Lincoln Memorial Drive
Milwaukee, Wisconsin

Note: Bidder must state prices in words and figures and sign proposal. Furnish and install each item as specified in contract documents.

		T	
7		Place new 1-inch PVC conduit under slab per plan for future use. Includes elbows, cap and all accessories as required.  Per linear foot	
8		New concrete steps, insulation and waterproofing system. Includes all reinforcing, sealants, flashing and accessories required. Includes upgrades to railing.  Per s.f.	
9		Replace expansion joint at landing on south/north stairs. Includes accessories and flashing as needed.  Per linear foot	
10	210 l.f.	Replace expansion joint at West Edge of building using stainless plate. Sawcut adjoining slab at surface. Includes accessories and flashing as needed.  Per linear foot	
11		Remove S.S. flashing, patch concrete surface to match, carry waterproofing up edge and reinstall or replace flashing as needed at each column base  Per each	
12	l.f.	Replace expansion joint at East edge of building Includes accessories and flashing as needed. Include patching as required.  Per linear foot	
13	L.S.	Set granite pavers as provided by others in mortar bed per plan details. Include all accessories necessary to complete installation. Does not include waterproofing Per lump sum	

### PROJECT NO. O517-14626 SCHEDULE OF PRICES

WMC/MAM Conrete Deck Restoration
AT: Milwaukee County War Memorial Center
750 North Lincoln Memorial Drive
Milwaukee, Wisconsin

Note: Bidder must state prices in words and figures and sign proposal. Furnish and install each item as specified in contract documents.

14		Repair broken granite "honor roll" stones and remove, clean and replace all sealant between and around stones.  Per lump sum		
15	1 LumpSum	Miscellaneous Allowance  Seventy- five Thousand Dollars and 00/100  Lump Sum	\$75,000.00	\$75,000.00

### **Base Bid**

Total amount for items one (1) through fifteen (15) inclusive.

Total alloant for h	terns one (1) through litteen (15) inclusive.	
	Dollars	\$
Alternative Bids		
	Per sheet A10, complete repairs to "Floating Stairs" in	
Alternative Bid A1:	courtyard. Include electrical fixtures & repairs to existing guardrail.	
	Add to Base Bid the sum of:	
	Dollars	\$
Alternative Bid A2:	Provide traffic coating over top surface and sides of repaired "floating stairs" as specified.  Add to Base Bid the sum of:	
	Dollars	c
	Dollars	9
Alternative Bid A3:	In lieu of repairing guardrail on "floating stairs" (Alt.A1), provide new rails per details on sheet A8. Add or (deduct) to Base Bid the sum of:	
	Dollars	\$
Alternative Bid B1:	Provide black PVC liner in reflecting pool per specifications.	
	Add to Base Bid the sum of:	
	Dollars	\$

NOTE: The Contract will be awarded on the Basis of the Base Bid and combinations of alternatives, whichever is most advantageous to Milwaukee County.

### **AFFIDAVIT**

State of	-
County of	-
(Marca)	being duly sworn, deposes and
(Name)	
states that they are the	(Official Capacity)
(Nam	e of Firm)
and that Contractors Qualification Statemen	t filed with County
Clerk on	for said firm remains true and
correct. I understand that the willful falsificat penalty pursuant to Chapter 101 Statutes.	tion of information may result in a civil or criminal
(Signature	and Title)
Subscribed and sworn to before me this 20	day of,
My commission expires	, 20
	(Notary Public)

If a qualification statement has been filed more than 3 years before the opening of this bid, submit a new qualification statement not less than five days before the opening of this bid.

State of Wisconsin Department of Workforce Development Equal Rights Division

### Disclosure of Ownership

The statutory authority for the use of this form is prescribed in Sections 66.0903(12)(d), 66.0904(10)(d) and 103.49(7)(d), Wisconsin Statutes

The use of this form is mandatory. The penalty for failing to complete this form is prescribed in Section 103.005(12), Wisconsin Statutes.

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1) (m), Wisconsin Statutes]

- (1) On the date a contractor submits a bid to or completes negotiations with a state agency, local governmental unit, or developer, investor or owner on a project subject to Section 66.0903, 66.0904 or 103.49, Wisconsin Statutes, the contractor shall disclose to such state agency, local governmental unit, or developer, investor or owner, the name of any "other construction business", which the contractor, or a shareholder, officer or partner of the contractor, owns or has owned within the preceding three (3) years.
- (2) The term "other construction business" means any business engaged in the erection, construction, remodeling, repairing, demolition, altering or painting and decorating of buildings, structures or facilities. It also means any business engaged in supplying mineral aggregate, or hauling excavated material or spoil as provided by Sections 66.0903(3), 66.0904(2), 103.49(2) and 103.50(2), Wisconsin Statutes.
- (3) This form must ONLY be filed, with the state agency project owner, local governmental unit project owner, or developer, investor or owner of a publicly funded private construction project that will be awarding the contract, if both (A) and (B) are met.
  - (A) The contractor, or a shareholder, officer or partner of the contractor:
    - (1) Owns at least a 25% interest in the "other construction business", indicated below, on the date the contractor submits a bid or completes negotiations.
    - (2) Or has owned at least a 25% interest in the "other construction business" at any time within the preceding three (3) years.
  - (B) The Wisconsin Department of Workforce Development (DWD) has determined that the "other construction business" has failed to pay the prevailing wage rate or time and one-half the required hourly basic rate of pay, for

### **Other Construction Business**

Name of Business				
Street Address or P O Box		City	State	Zip Code
Name of Business		*		
Street Address or P O Box	- 10.15	City	State	Zip Code
Name of Business				
Street Address or P O Box		City	State	Zip Code
Name of Business				
Street Address or P O Box		City	State	Zip Code
I hereby state under penalty of perjury that the in accurate according to my knowledge and belief.	formation, c	ontained in this documen	ıt, is tru	e and
Print the Name of Authorized Officer				
Signature of Authorized Officer	Date Signed			
Name of Corporation, Partnership or Sole Proprietorship				
Street Address or P O Box		City	State	Zip Code
accurate according to my knowledge and belief.  Print the Name of Authorized Officer  Signature of Authorized Officer  Name of Corporation, Partnership or Sole Proprietorship		City		Zip Code



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Project No: 0517-14626

# SUBCONTRACTOR/SUBCONSULTANT/SUPPLIER INFORMATION SHEET

Milwaukee County requires the following collection of information on all subcontractors, sub-consultants and/or suppliers submitting quotes on Milwaukee County projects. This information is to be submitted with bid/proposal.

# PROVIDE THE FOLLOWING INFORMATION ON EACH BID/QUOTE

Work or Service to be Performed					
Date Annual Firm Gross Established Receipts (**)					
Date Firm Established				ā	
Address					
DBE Yes/No					
Name					
*(2)					

(\*) Check if this firm's quote has been used in your bid/proposal. (\*\*) Annual Gross Receipts:

A: Less than \$250,000

A: Less than \$250,000 D: \$1 million to \$5 million

B: \$250,000 to \$500,000 E: \$5 million to \$15 million

C: \$500,000 to 1 million F: More than \$15 million

Note: Information gathered on the background and financial status of firms is protected from disclosure by Federal Regulation.



### **COMMUNITY BUSINESS DEVELOPMENT PARTNERS MILWAUKEE COUNTY**

COMMITMENT TO CONTRACT WITH DBE

(This form is to be completed by the bidder/proposer and the DBE named for submission with bid/proposal)

PROJECT No.: <u>0517-14626</u>	PROJECT TITLE: War Memorial C	oncrete Deck Rep	<u>oairs</u>				
TOTAL CONTRACT AMOUNT \$	DBE	DBE Goal: <u>25%</u>					
Name & Address of DBE <sup>(*)</sup>	Scope of Work Detailed Description	DBE Contract Amount	% of Total Contract				
(* Separate commitment form must be completed for each	DBE firm)						
Bidder/Proposer Commitme	ent (To be completed by firm committing wo	ork to DBE)					
I certify that the DBE firm listed quoted the negotiated with, and having received confirmation subcontractors, will enter into contract with the this contract. A copy of the contract between of seven (7) days from receipt of Notice-to-Proceed best of my knowledge. I further understand appropriate sanctions under applicable law.	on, on partnering, pricing and delivery from DE(Phone No DBE firm listed, for the service(s) and amount our firm and that of the named DBE will be sub- ted on this contract. The information on this for	BE firm listed here), or one nt(s) specified who mitted directly to C rm is true and acc	in. Our firm of our en awarded CBDP within curate to the				
Signature of Authorized Representative	Name & Title of Authorized Representative	Date					
Subscribed and sworn to before me this	day of, 20						
Signature of Notary Public	State of My Commission exp	ires					
[SEAL]							
* Only firms certified as DBEs (within qualifying NAICS codes)	by the State of Wisconsin UCP prior to bid/proposal opening	ng will be credited on th	is contract				
DBE Affirmation (To be co	ompleted by DBE Owner/Authorized Repres	entative)					
<ul> <li>I affirm that the State of Wisconsin UCP has certified our company as a DBE, and that our company is currently listed in the State of Wisconsin UCP Directory.</li> <li>I acknowledge and accept this commitment to contract with my firm for the service(s) and dollar amount(s) specified herein, as put forth by</li> <li>I understand and accept that this commitment is for service(s) to be rendered in completion of the Milwaukee County project specified herein to be completed with my own forces, unless otherwise approved by CBDP.</li> <li>I affirm that approval from CBDP will be obtained prior to subletting any portion of this work awarded to my firm on this project.</li> </ul>							
Signature of Authorized DBE Representative	Name & Title of Authorized DBE Representative	Date					
	FOR CBDP USE ONLY						
Commitment number of Project	t Total: (A) (V) \$	Total %					
Verified with:	Authorized Signature		Date				



# COMMUNITY BUSINESS DEVELOPMENT PARTNERS MILWAUKEE COUNTY

### COMMITMENT TO CONTRACT WITH DBE

### **ADDITIONAL INFORMATION & REQUIREMENTS:**

- The Directory of Certified DBE firms eligible for credit toward the satisfaction of this project's DBE goal will be found at the following link, and can be searched by Name and/or NAICS code. https://app.mylcm.com/wisdot/Reports/WisDotUCPDirectory.aspx
- CONTRACT ADJUSTMENTS: Prime contractor/consultant shall maintain the approved DBE participation level during the term of the contract with Milwaukee County to include additional work on the contract, e.g., use of allowance, change orders, addendums, extra work, etc. Contract adjustments shall include proportional DBE participation.
- 3. WRITTEN CONTRACTS WITH DBEs: CBDP requires that prime contractors/consultants enter into contract, directly or through subcontractors, with the DBE(s) specifying the work to be completed and the dollar amount as indicated in this form. Agreements must be submitted to CBDP within 7 days of receipt of the Notice-To-Proceed, or execution of the Purchase Order. By executing the above affidavit, your company is certifying, under oath, that you have had contact with the named DBE firm(s), that the DBE firm(s) will be hired, and that the DBE firm(s) will participate to the extent indicated in performance of the contract. VIOLATION OF THE TERMS OF THIS AFFIDAVIT IS GROUNDS FOR TERMINATION OF YOUR CONTRACT.
- 4. SUBSTITUTIONS, DBEs SUBCONTRACTING WORK, TRUCKING FIRMS: The prime contractor/ consultant must submit written notification of desire for substitution to the DBE affected, and forward a copy to CBDP, specifying the reason for the request. Any DBE so notified has five (5) business days to provide written objection/acceptance to the prime making the notification. The "right to correct" must be afforded any DBE objecting to substitution/termination for less than good cause as determined by CBDP. Approval must be obtained from CBDP prior to making any substitutions. DBE contractors are also required to notify and obtain approval from CBDP prior to seeking to subcontract out work on this project. In the case of DBE trucking firms, credit will be given for trucks leased from other DBE firms; however, if the DBE leases trucks from non-DBE firms, only the commission or fee will be counted for DBE crediting.
- 5. **REQUESTS FOR PAYMENT**: Contractor/Consultant must indicate on the Continuation Sheet (AIA form G703) the work being performed by DBEs by either a) placing the word "DBE" behind the work item or b) breaking out the work done by DBEs at the end of the report. Prime contractor/consultant shall notify DBEs of the date on which they must submit their invoices for payment.
- 6. **DBE UTILIZATION REPORTS**: A DBE Utilization Report (DBE-16) must be submitted with each request for payment for the period's activity, even if no activity takes place during the period being reported. Payments will be withheld from all prime contractors/consultants not in compliance.

If you have any questions on forms or related to Milwaukee County's DBE Program, please contact CBDP Compliance Team / <a href="mailto:cbdpcompliance@milwcnty.com">cbdpcompliance@milwcnty.com</a> / 414.278.4747